

Signed under the penalties of perjury:

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

RECEIVED AND RECORDED

File with: City or Town Clerk or Election Commission 10/24/210CT 25 A 10: 50 Ending Date: Fill in Reporting Period dates: Beginning Date: 1/1/21 Type of Report: (Check one) dissolution 30 day after election year-end report ⊠ 8th day preceding election 8th day preceding preliminary Committee to Elect Dr. Kenann F. McKenzie Dr. Kenann F. McKenzie DeFranza Committee Name Candidate Full Name (if applicable) Andrew DeFranza School Committee Ward 2 Name of Committee Treasurer Office Sought and District 11 Webber Ave 11 Webber Ave. Committee Mailing Address Residential Address kenann.mckenzie@gmail.com kenann.mckenzie@gmail.com E-mail: Phone # (optional): Phone # (optional): **SUMMARY BALANCE INFORMATION:** Line 1: Ending Balance from previous report Line 2: Total receipts this period (page 3, line 11) 1700.00 Line 3: Subtotal (line 1 plus line 2) 1700.00 Line 4: Total expenditures this period (page 5, line 14) 545.90 Line 5: Ending Balance (line 3 minus line 4) 1154.10 Line 6: Total in-kind contributions this period (page 6) Line 7: Total (all) outstanding liabilities (page 7) Line 8: Name of bank(s) used: Eastern Bank Affidavit of Committee Treasurer: I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including all contributions, loans, receipts, expenditures, dispursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55. Date: 10/25/21 (Treasurer's signature) Signed under the penalties of perjury: FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 box only) Leertify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55. I have not received any contributions, incurred any liabilities nor made any expenditures on my behalf during this reporting period that are not otherwise disclosed in this report. Candidate without Committee I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this candidate in accordance with the requirements of M.G.L. c. 55. Date: (0/23/2)

SCHEDULE A: RECEIPTS

M.G.L. c. 55 requires that the name and residential address be reported, in alphabetical order, for all receipts over \$50 in a calendar year. Committees must keep detailed accounts and records of all receipts, but need only itemize those receipts over \$50. In addition, the occupation and employer must be reported for all persons who contribute \$200 or more in a calendar year.

(A "Schedule A: Receipts" attachment is available to complete, print and attach to this report, if additional pages are required to report all receipts. Please include your committee name and a page number on each page.)

F	Please include your committee name and a pa Name and Residential Address		Occupation & Employer
Date Received	(alphabetical listing required)	Amount	(for contributions of \$200 or more)
	Scott Dullea		
	36 Dane St. Beverly MA		
3/15/21 (est)		100.00	
	Mehreen Butt		
	894 Maint St. #10 Wakefield MA 01880		
9/11/21		100.00	
	Tarae Howell 843B Main St.		
	Wakfield MA 01880	100.00	
9/11/21		100.00	
	Kristen Cotter 34 Washington St.		
	Beverly MA 01915	100.00	
9/12/21			
	Susan Hammerle		
9/13/21	Danvers MA 01923	100.00	
2) 13) 41			
	Salura Cook 23 Broadway Beverly MA 01915		
9/13/21	Hereity MA 01913	100.00	
	Rachel Sherman		
	15 Glen Acre Drive. Pittsfield, NY 14534		
9/18/21		100.00	
	Neil Levine		Certified Professional Coach Levine Strategies
	36 Thorndike St. Beverly MA 01915		Levine Strategies
9/20/21		250.00	
	Nadine Cohodas 2122 California St. NW		
	Washington DC 20008	100.00	
9/22/21		100.00	
	J L		
Line 9: Total Rec	eipts over \$50 (or listed above)	1050.00	
T. 10. Thurst D	points \$50 and under* (not listed shove)	650.00	
Line IU: Total Rec	ceipts \$50 and under* (not listed above)	650.00	<u>]</u>
Line 11: TOTAL	RECEIPTS IN THE PERIOD	1700.00	← Enter on page 1, line 2
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SCHEDULE B: EXPENDITURES

M.G.L. c. 55 requires committees to list, in alphabetical order, all expenditures over \$50 in a reporting period. Committees must keep detailed accounts and records of all expenditures, but need only itemize those over \$50. Expenditures \$50 and under may be added together, from committee records, and reported on line 13.

(A "Schedule B: Expenditures" attachment is available to complete, print and attach to this report, if additional pages are required to

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
Date Laid	Cafe Press	www.cafepress.com	T Shirts	
				141.77
/7/21				171.//
	Thift Co.	56 Pulaski St. Peabody MA 01960	Signs	
				354.13
/16/21		TE6 Pulacki St	Signs	
	Thrift Co.	56 Pulaski St. Peabody MA 01960		
/22/21				50.00
,				
		Line 12: Total Expendit	ures over \$50 (or listed above)	495.
			ares \$50 and under* (not listed above)	50.
			ENDITURES IN THE PERIOD	545.

^{*} If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized Page 4 above.

SCHEDULE C: "IN-KIND" CONTRIBUTIONS

Please itemize contributors who have made in-kind contributions of more than \$50. In-kind contributions \$50 and under may be added together from the committee's records and included in line 16 on page 1.

Date Received	From Whom Received*	Residential Address	Description of Contribution	Value
Date Received	From whom Received	Acsidential Pada ess		
	Line 15: In-Kind Contributions over \$50 (or listed above)			
		Line 16: In-Kind Contributions \$50 & under (not listed above)		
	Enter on page 1, line 6 →	ne 6 → Line 17: TOTAL IN-KIND CONTRIBUTIONS		

^{*} If an in-kind contribution is received from a person who contributes more than \$50 in a calendar year, you must report the name and address of the contributor; in addition, if the contribution is \$200 or more, you must also report the contributor's occupation and employer.

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SCHEDULE D: LIABILITIES

M.G.L. c. 55 requires committees to report ALL liabilities which have been reported previously and are still outstanding, as well as those liabilities incurred during this reporting period.

Date Incurred	To Whom Due	Address	Purpose	Amount
]	
				A CONTRACTOR OF THE CONTRACTOR
		Line 18: TOTAL OUTSTA		